

UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY	
Caption in Compliance with D.N.J. LBR 9004-1(b)	
PETER PENA, ESQ. PP0324 ONE LEE PLACE PATERSON, NEW JERSEY 07505 (973) 278-800 ATTORNEY FOR DEBTOR	
In Re:  ANTONIA G. BENITEZ	Case No.:            19-18638  Chapter:            13  Hearing Date:      JUNE 20, 2019 @ 8:30 AM  Judge:              PAPALIA

**CERTIFICATION OF ANTONIA BENITEZ IN RESPONSE TO OBJECTION**

I, Antonia Benitez, am the debtor in the above captioned case and I submit this

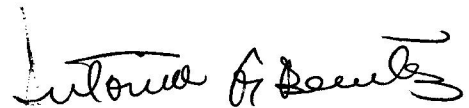
Certification in Response to the objection filed by the Trustee herein.

1. The Trustee’s objection raises questions as to the viability of the plan based on my income. An issue arose when I presented a current paystub at the meeting of creditors and same had a deduction of \$100.00 thereby reducing my net income from what my schedules had illustrated.

2. In the earlier part of this year I had to have a medical procedure and my employer allows an advance for same. I had taken \$500 for the procedure and the employer deducted \$100 per week for five weeks. I attached hereto a copy of a paystub from May 15, 2019 showing said deduction (See Exhibit A).
3. I have paid same completely and I attach hereto my most recent paystub which shows that the \$100 deduction is no longer being made from my weekly paycheck (See Exhibit B).
4. In addition, a creditor has filed a claim on an automobile which was determined a total loss after an accident. I did not anticipate this claim as I believed the insurance company had paid the entire amount due them.
5. As a result of the above a family member has agreed to make a monthly contribution of \$300 per month towards my expenses for the term of my plan (See Exhibit C). This amount will be enough to cover any discrepancies in my proposed plan as well as the new creditor. This is a 100% plan.
6. I will be filing the amended schedules and plan accordingly to reflect these changes.

I certify under penalty of perjury that the above is true.

Date: 6-7-2019



Antonia G. Benitez

## **EXHIBIT A**

AMERICAN MUSICAL SUPPLY  
8 THORNTON ROAD  
OAKLAND, NJ-07436

Period Ending: 05/05/2019  
Pay Date: 05/08/2019

Taxable Marital Status: Single  
Exemptions/Allowances:  
Federal: 0  
NJ: Table A

ANTONIA GIL DE BENITEZ  
[REDACTED]  
[REDACTED]

Earnings	rate	hours	this period	year to date
Reg/Straight	14.4000	40.00	576.00	9,996.05
Overtime	21.6000	5.08	109.73	1,261.01
Holiday				230.40
Gross Pay			\$685.73	12,409.06

Other Benefits and Information	this period	total to date
Er-K	17.14	310.20
P	19.43	369.17
401K		620.44

Deductions	Statutory		
Federal Income Tax		-63.34	1,123.29
Social Security Tax		-41.31	746.47
Medicare Tax		-9.66	174.58
NJ State Income Tax		-11.11	200.51
NJ SUI/SDI Tax		-4.64	83.77
Other			
Advance		-100.00	300.00
Dental		-1.86*	35.34
Medical		-16.48*	313.12
Rsv For Adp401K		-86.64	1,646.16
Vision Plan		-1.09*	20.71
401K		-34.29*	620.44
Net Pay		\$315.31	
Checking 1		-315.31	7,144.67
Net Check		\$0.00	

Time Card Detail					
DATE	IN	OUT	IN	OUT	TOTAL
MON 04/29	8:30AM	12:30PM	1:31PM	6:30PM	6.98
TUE 04/30	8:29AM	12:31PM	1:32PM	6:32PM	9.03
WED 05/01	8:33AM	12:30PM	1:31PM	6:31PM	8.95
THU 05/02	8:30AM	12:34PM	1:31PM	6:31PM	9.07
FRI 05/03	8:31AM	12:31PM	1:31PM	6:34PM	9.05

\* Excluded from federal taxable wages  
Your federal taxable wages this period are \$632.01

VERIFICATION AREA: COLORED AREA MUST CHANGE IN TONE GRADUALLY AND EVENLY FROM DARK AT TOP TO LIGHTER AT BOTTOM

AMERICAN MUSICAL SUPPLY  
8 THORNTON ROAD  
OAKLAND, NJ-07436

Advice number: 00009  
Pay date: 05/08/2019

Deposited to the account of  
ANTONIA GIL DE BENITEZ

account number: 3587  
transit ABA: XXXX XXXX  
amount: \$315.31

THIS IS NOT A CHECK

NON-NEGOTIABLE

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**EXHIBIT B**



**EXHIBIT C**

**CONTRIBUTION LETTER**

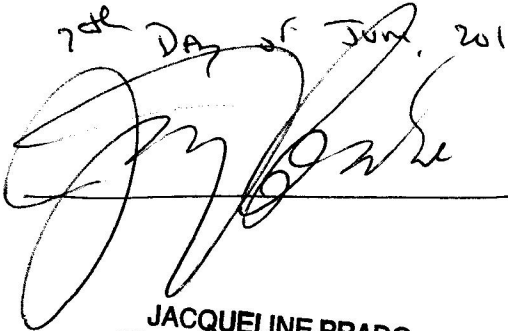
1. I, Victor Quilvio Montesino, am the cousin of Antonia Benitez.
2. I understand that she has filed a Chapter 13 Bankruptcy petition under case number 19-18638.
3. I have agreed to contribute the sum of \$300.00 per month towards her expenses so that her proposed plan may work.
4. I agree to make these contributions for the life of the plan which I understand will be for five (5) years.

I certify under penalty of perjury that the above is true.

Dated: June 7, 2019

  
Victor Quilvio Montesino

Susan : Subscribed to  
before me on this  
7<sup>th</sup> Day of June, 2019



JACQUELINE PRADO  
NOTARY PUBLIC OF NEW JERSEY  
MY COMMISSION EXPIRES OCT. 31, 2021